



May 4, 2012 (Updated May 31, 2012)

Announcement 471

Anesthesia Services Claims Submitted Electronically

Between January 1, 2012, and March 9, 2012, providers who submitted claims for anesthesia services electronically using the Accredited Standards Committee (ASC) X12 Version 5010 Professional Health Care Claim and Encounter 837P format were overpaid if providers billed the services in minutes.

Affected claims will be reprocessed to recoup overpayments. The adjudication of the reprocessed claims will be reflected on a future remittance advice. No action is required by providers.

Effective January 1, 2012, electronic billers using the Version 5010 837P transaction are instructed to bill anesthesia services in minutes rather than units.

Five procedure codes must be billed in units: 01953, 01967, 01968, 01969 and 01996.